UNITED STATES DISTRICT COURT	ener des dest	,	
SOUTHERN DISTRICT OF NEW YORK	RECEIVE	f:	
Argene Suguera	SONY DOCKE	TUNIT	
	2017 APR 18 PA	1349037	0002
(In the space above enter the full names(s) of the plainti	ff(s).)		2803
-against-		unde	er the
NEW Uponk ORty Et	Alo	•	42 U.S.C. § 1983 Complaint)
			Yes□No eck one)
		_ (Cn	·
		- -	
		- .	
		<u>.</u>	•
(In the space above enter the full name(s) of the defend		-	
Cannot fit the names of all of the defendants in the space please write "see attached" in the space above and attached additional sheet of paper with the full list of names. The listed in the above caption must be identical to those co Part I. Address should be included here)	h an e names		
I. Parties in this Complaint	,		
A. List your name, identification number, confinement. Do the same for any ad of paper as necessary.	and the name and ac ditional plaintiffs na	ldress of your curre amed. Attach additi	nt place of onal sheets
Plaintiff Name ANNO No.	MAKAM		
Current Institution Now Address Port - S	194846 CC	professor	19190A7 1A7
26 Well und	1574		
			,
B. List all defendants' names. Positions, produced defendant may be served. Make sure	that the defendant(s)	listed below are in	dentical to
those contained in the above caption.	. Attach additional s	sheets of papers as i	necessary.

To Condent NIo 1	Name 7,0 M?CNARI SMOUN	13691 Shied # 13691
Defendant No. 1	TVI Crimently Employed	ZV ZV ZV
<i>,</i> ·	Address I G DAY	143 tou HAS
•	New years, My 10035)
,		Shied # <u>4522</u>
Defendant No. 2	Name ROO RAKROCK OALU	Specarct (Spring)
,	TYPE Commentally Employed ()	5.5.5.0.1(4.0.1.1.1.1.1.1.1.1.1.1.1.1.1.1.1.1.1.1.
	Address \\\\Q\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\	agrow ray
	WENT HOSIE WA 10030	}
		Shied#
Defendant No. 3	NameWhere Currently Employed	
	Where Currelly Employed	
•'	Address	
•		•
	NameWhere Currently Employed	Shied #
Defendant No. 4	Name	
•	Address	•
	Addiess	
•		
Defendant No. 5	Name	Shied #
Detendant 140. 5	NameWhere Currently Employed	*
	Address	
.		
II. Statement of	f Claim:	
State as briefly as p	ossible the <u>facts</u> of your case. Describe how exvolved in this action, along with the dates and	ach of the defendants in the caption of d locations of all relevant events. You
may wish to include	volved in this action, along with the dates and e further details such as the names of other per	sons involved in the events giving and the country in the country
to your claim. Do n	ot cite any case or statues. If you intend to alle	sheets of paper as necessary.
and set forth each c	laim in a separate paragraph. Attaon additional	
A In what inst	itution did the events giving rise to your clam(s) occur?
A. In what inst		·
		1.1. ()
B. Where in th	e institution did the events giving rise to your	claim(s) occur?
i		•
777 / 1.4.	nd approximate time did the events giving rise	e to your claim(s) occur?
. C. What date a	na approximate title did the course	
	,	

D. Facts: Me to me to have to	CRAILY PROFESSOR OF TRUE CONSTITUTE AND FRESCHOOL OF TRUE OF TRUE BOTH AND STREET OF TRUE PROVINCE CAUSE OF THE WHAT MEDICAL
OFFICEN PARTICE A 10+ 0+her perco	ACRANY PROFILES AND FRESHED OF SEASON PROVINCE CAUSE OR REASON PROVINCE CAUSE OR REASON AND SALY & USCAL, A long with DERIAND.
OFFICEN PARTICE A 10+ 0+her perco	AND FRESHED OU OFFERS 3691 AND (STREPPED SEARCY) PROVIDENCE CAUSE (OR REASON) AND REASON SALUX USON, A long with STREAMS.
OFFICEN PARTICE A 10+ 0+her perco	AND FRISHED OFFRER 3691 AND (5482 PRED SEARCY) PROVINCIE CAUSE OF REAGO AND REAGO AN
OFFICEN PARTICE A 10+ 0+her perco	AND FRISHED OUT OFFICES BORD AND STREET OF REASON PROVIDENCE OF REASON DAILY # 4522, A long NRH DARRED.
re and injurious related to the	SALL HOUSE describe them and state what medical
rcind injuries related to the	AND SARRED SCARCY PROVIDE CAUSE OF REAGO REAGO AND R
Toi in invited to the	PROVINOLE CAUSE ON REASON AND STARTS The shows describe them and state what medical
Toi in invited to the	CAUSE WAS A long with medica
roi in invited to the	DANY 4322, A long with them and state what medical
rs and injuries related to the	SALY* USZZ, A long with
rsi iniming related to the	SALY* U322, A long with
rci injuries related to the	CALLE MOZZ, A long with
TC related in invited related to the	DANG W322, A long with
TC related in invited related to the	SALY* 4322, A long with
TC related in invited to the	DALY WORZ, A long with
TC related injuries related to the	the share describe them and state what medical
rs related to the	the state what medical
roundinal injurior related to the	11 - 1 chave describe them and state what medica
rs related to the	the state what medical
rci injuries related to the	the state what medical
treatment, if any, you required and receive	e events alleged above, describe them and state what medical ved. The Supplemental ved.
<u> </u>	
7	D aliane
IV. Exhaustion of Administrative R	Remedies:
- 0 4 (670)	TRAN 42 II S.C. \$ 1007e(a) requires that "Inlo action shall be
The Prisoner Litigation Reform Act ("PI	PLRA"), 42 U.S.C. § 1997e(a), requires that "[n]o action shall be one under section 1983 of this title, or any or Federal law, by the correctional facility until such administrative remedies a
brought with respect to prison condition	ons under section 1705 of this day, or there correctional facility until such administrative remedies a
prisoner confined in any jail, prison, or are available are exhausted." Administra	ons under section 1983 of this unit, of the correctional facility until such administrative remedies a ative remedies are also known as grievance procedures.
	you were confined in a jail, prison, or other correctional
facility?	
P .	
Yes No	

Case 1:17-cv-02803-CM Document 2 Filed 04/18/17 Page 4 of 11

	ES, name the jail, prison, or other correctional facility where you were confined at the time e events giving rise to your claim(s).
В.	Does the jail, prison or other correctional facility where your claim(s) arose have a grievance procedure?
	Yes No Do Not know
C.	Does the grievance procedure at the jail, prison, or other correctional facility where your claim(s arose cover some or all your claim(s)?
	Yes No Do Not know
	If YES, which claim(s)?
D.	Did you file a grievance in the jail, prison, or other facility correctional where your claim(s) arose?
	Yes No
	If NO, did you file a grievance about the events described in this complaint, where did You file the grievance?
	Yes No
E.	If you did file a grievance, about the events described in this complaint, where did you file the Grievance?
•	1. Which claim(s) in this complaint did you grievance
	2. What was the result, if any?
	3. What steps, if any, did you take to appeal that decision? Describe all efforts to appeal to The highest level of the grievance process.
•	

F.	If you did not file a grievance; 1. If there are any reason why you did not file a grievance, state them here:
	1. If there are any reason why you did not the a griovance, state them note:
	2. If you did not file a grievance but informed any official of your claim, state who you in
	informed, when and how, and their response, if any:
· .	
,	
G.	Please set forth any additional information that is relevant to the exhaustion of your administrative remedies.
	administrative remodes,
•	
Note:	You may attach as exhibits to this complaint any documents related to the exhaustion of your administrative remedies.
v.	Relief:
State v That y	what you want the Court to do for you (including the amount of monetary compensation, if any, you are seeking and basis for such amount).
KW	DOUL + OX \$ 5.5.000,000 du CONTEMBETLOUS
(1) (2) (2) (2) (3) (4) (4) (4) (4) (4) (4) (4) (4) (4) (4	LILLIA MONELAKULETCE ING CONFLUENTO

	VI.	Previous lawsuit:
On these	A.	Have you filed other lawsuits in state or federal court dealing with the same facts involved in this action?
claims		Yes No
	В.	If your nswer to A is yes, describe each lawsuit by answering questionings 1 through 7 below. (If there is more than one law suit, describe the additional lawsuits on another sheet of paper, using the same format.)
•		1. Parties to previous lawsuit:
•.		Plaintiff
· .		Defendants
		2. Court (if federal court, name the district, if state court, name the county)
		3. Docket or index number
		4. Name of Judge assigned to your case
· ·		5. Approximate date of filing lawsuit
•		6. Is the case still pending? Yes No
		7. What was the result of the case? (For example: Was the case dismissed? Was there Judgment in your favor? Was the case appealed?
•		
On .	C.	Have you filed other lawsuits in state or federal court otherwise relating to your imprisonment?
other claims		Yes No
	D.	If your answer to C is Yes, describe each lawsuit by answering questions 1 through 7 below.
		(If there is more than one lawsuit, describe the additional lawsuits on another piece of paper, Using the same format.)
• .		1. Parties to previous lawsuit:
•	.	Plaintiff
		Defendants

Case 1:17-cv-02803-CM Document 2 Filed 04/18/17 Page 7 of 11

	2.	Court (if federal court, name the district, if state court, name the county)
•	3.	Docket or index number
	4.	Name of Judge assigned to your case
	5.	Approximate date of filing lawsuit
·	6.	Is the case still pending? Yes No
	7.	What was the result of the case? (For example: Was the case dismissed? Was there Judgment in your favor? Was the case appealed?
• .		Judgment in your lavor: was the case off
ash T	Iore nn	der penalty of perjury that the forgoing is true and correct.
		12 day of April , 20 17.
		Signature of Plaintiff Anobe Onham
	-	Towards Nyumbor 17A 064
		Institution Address TOWNSTATE CORROFA
		1
Note	: All p	plaintiffs named in the caption of the complaint must date and sign the complaint and provide inmate numbers and addresses.
deliv	ering t	der penalty of perjury that on this \(\frac{1}{2}\) day of \(\frac{1}{2}\) \(\frac{1}{2}\) \(\frac{1}{2}\) \(\frac{1}{2}\) and the pro Se Office of the United States art for the Southern District of New York.
•		Signature of Plaintiff Anche Onham